

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|----------|
| FEE DETERMINATION | AS | | 10/5/99 |
| O.I.P.E. CLASSIFIER | | 59 | 10/13 |
| FORMALITY REVIEW | | 10008 | 10-18-99 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|----------|
| 1 | ✓ | ✓ | 2/28/01 |
| 2 | ✓ | ✓ | 7/19/01 |
| 3 | ✓ | ✓ | 1/12/01 |
| 4 | ✓ | ✓ | 3/7/02 |
| 5 | ✓ | ✓ | 11/14/02 |
| 6 | ✓ | ✓ | ✓ |
| 7 | ✓ | ✓ | ✓ |
| 8 | ✓ | ✓ | ✓ |
| 9 | 0 | ✓ | ✓ |
| 10 | 0 | ✓ | ✓ |
| 11 | 0 | ✓ | ✓ |
| 12 | 0 | ✓ | ✓ |
| 13 | 0 | ✓ | ✓ |
| 14 | 0 | ✓ | ✓ |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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